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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 1718-009B																												
<table border="1"> <tr> <td colspan="2">In re Application of The University of Michigan</td> </tr> <tr> <td>Application Number 09/852,154</td> <td>Filed 9 May 2001</td> </tr> <tr> <td colspan="2">For Composition and Methods for Use Against Acne Induced . . .</td> </tr> <tr> <td>Group Art Unit 1645</td> <td>Examiner NA</td> </tr> </table>			In re Application of The University of Michigan		Application Number 09/852,154	Filed 9 May 2001	For Composition and Methods for Use Against Acne Induced . . .		Group Art Unit 1645	Examiner NA																				
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<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table> <tr> <td><input type="checkbox"/></td> <td>One month (37 CFR 1.17(a)(1))</td> <td>\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Two months (37 CFR 1.17(a)(2))</td> <td>\$ 400.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Three months (37 CFR 1.17(a)(3))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Four months (37 CFR 1.17(a)(4))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Five months (37 CFR 1.17 (a)(5))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td colspan="2">Applicant is a small entity under 37 CFR 1.9 and 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____</td> </tr> </table> <p>A small entity statement under 37 CFR 1.27:</p> <table> <tr> <td><input type="checkbox"/></td> <td>is enclosed.</td> </tr> <tr> <td><input type="checkbox"/></td> <td>has already been filed in this application.</td> </tr> <tr> <td><input type="checkbox"/></td> <td>A check in the amount of the fee is enclosed.</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>08-2776</u>. I have enclosed a duplicate copy of this sheet.</td> </tr> </table> <p>I am the <input type="checkbox"/> assignee of record of the entire interest.</p> <p><input type="checkbox"/> applicant.</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p>Registration number if acting under 37 CFR 1.34(a). _____</p> <p>17 October 2001 _____ Date</p> <p>_____ Signature Bradley N. Ruben Reg. No.: 32,058 _____ Typed or printed name</p>			<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ _____	<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ 400.00	<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ _____	<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$ _____	<input type="checkbox"/>	Five months (37 CFR 1.17 (a)(5))	\$ _____	<input type="checkbox"/>	Applicant is a small entity under 37 CFR 1.9 and 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____		<input type="checkbox"/>	is enclosed.	<input type="checkbox"/>	has already been filed in this application.	<input type="checkbox"/>	A check in the amount of the fee is enclosed.	<input checked="" type="checkbox"/>	The Commissioner has already been authorized to charge fees in this application to a Deposit Account.	<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>08-2776</u> . I have enclosed a duplicate copy of this sheet.
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Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.